OMB APPROVAL FORM D CMB Number 3235-0076 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Expires: November 30, 2001 ed average burden Washington, D.C. 20 r form 16.00 RECEIVED FORM D ORIGINA SEC USE ONLY NOXICE OF SALE OF SECURITIES **Рт**епіх Serial **FURSUANT TO REGULATION D.** DATE RECEIVED SECTION 4(6), AND/OR **UNIFORM LIMITED OFFERING EXEMPTION** Name of Offering (check if this is an amendment and name has changed, and indicate change.) Private Offering of Units of Limited Partnership Interests Filing Under (Check) box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Sound Real Estate Partners, L.P. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (including Area Code) 600 University Street, Suite 2018, Seattle, WA 98101 (206) 682-4227 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (including Area Code) (if different from Executive Offices) Brief Description of Business Purchase, acquisition, holding and disposal of multi-family apartment complexes Type of Business Organization corporation limited partnership, already formed other (please specify): business trust limited partnership, to be formed Month Year 8 0 2 Actual or Estimated Date of Incorporation or Organization: Actual 🖂 Estimate of [Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: W Α CN for Canada; FN for other foreign jurisdiction GENERAL INSTRUCTIONS Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below, or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Sound Capital Management, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 600 University Street, Suite 2018, Seattle, WA 98101 Check Box(es) that Apply: General and/or Promoter Beneficial Owner **Executive Officer** Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Executive Officer Director General and/or Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

A. BASIC IDENTIFICATION DATA

	B. INFORMATION ABOUT OFFERING									
1	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	□ Ves ☑ No								
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	☐ Yes ⊠ No								
2.	What is the minimum investment that will be accepted from any individual?	\$ 250,000								
3.	Does the offering permit joint ownership of a single unit?	☐Yes ⊠ No								
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission									
	or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.									
Full	l Name (Last name first, if individual)	<u></u>								
Busi	iness or Residence Address (Number and Street, City, State, Zip Code)	_								
Nan	ne of Associated Broker or Dealer	-								
State	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers									
_	(Check "All States" or check individual States)	All States								
[I	AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [L] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN]	[HI] [ID] [MS] [MO]								
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Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Nam	ne of Associated Broker or Dealer	-								
State	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers									
	(Check "All States" or check individual States)									
[A		[HI] [ID] [MS] [MO]								
[M	IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] OT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK]	[OR] [PA]								
[R	RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI]	[WY] [PR]								
Full	Name (Last name first, if individual)									
Busi	iness or Residence Address (Number and Street, City, State, Zip Code)									
Nam	ne of Associated Broker or Dealer									
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State	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers									
	(Check "All States" or check individual States)	All States								
	AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA]	[HI] [ID]								
[M	IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] IT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI]	[MS] [MO] [OR] [PA] [WY] [PR]								

(Use blank sheet, or copy and use additional copies of this sheet as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "O" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the column below the amounts of the securities offered for exchange and already exchanged. Aggregate Offering Amount Already Type of Security Price Sold Debt..... 0 Equity..... Common ☐ Preferred Convertible Securities (including warrants)..... 0 0 15,000,000 1,000,000 Partnership Interests ... Units of Limited Partnership Interests 0 Other (Specify _)..... Total 15,000,000 1,000,000 Answer also in Appendix, Column, 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "non" or "zero." Aggregate Number Dollar Amount of Purchases Investors 1.000.000 Accredited Investors Non-accredited Investors..... 0 0 N/A N/A Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Dollar Amount Type of Type of offering Security Sold Rule 505 N/A N/A Regulation A.... N/A N/A Rule 504..... N/A N/A N/A N/A Total Furnish a statement of all expenses in connection with the issuance and distribution of the 4. securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	\sqcup	\$0
Printing and Engraving Costs		\$0
Legal Fees	\boxtimes	\$25,000
Accounting Fees	\boxtimes	\$5,000
Engineering Fees.		\$0
Sales Commissions (specify finder's fees separately)		\$0
Other Expenses (identify)	\boxtimes	\$1,000
Total	\boxtimes	\$31,000

Edv	vard H. Hewson III	Manager of General Partner, Sound Capital Management, LLC						
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type))			_/		
Sou	nd Real Estate Partners, L.P.					9/5		63
Issu	er (Print or Type)	Signature				Date	,	777
ollov	ssuer has duly caused this notice to be signed by the wing signature constitutes an undertaking by the isst of its staff, the information furnished by the issuer	suer to furnish to the U.S. Sec	uritie	s and	d Exchange	Commi	ssio	n, upon written
	D.	FEDERAL SIGNATURE						
	Total Payments Listed (column totals added)					4,969	, 00	<u>0</u>
	Column Totals		Ш	\$	0	_	\$_	0
				\$	0		\$	0
	Other (specify)							
	Working capital		Ш	\$	0	_	\$	0
	Repayment of indebtedness			\$	0		\$_ •	0
	this offering that may be used in exchange for the asset issuer pursuant to a merger)	s or securities of another		\$	0		\$	0
	Construction or leasing of plant buildings and facilities Acquisition of other businesses (including the value of		L	\$	0	_ 니	\$	
	Purchase, rental or leasing and installation of machiner			\$	0		\$	0 0
	Purchase of real estate		_	\$	0	_ <u>X</u>	\$_	14,619,000
	Salaries and fees		X	\$_3	350,000		\$	0
	W I alt C - Question 4.0 above.				Payments to Officers, Directors & Affiliates			Payments to Others
i .	Indicate below the amount of the adjusted gross p to be used for each of the purposes shown. If the furnish an estimate and check the box to the I payments listed must equal the adjusted gross produce to Part C - Question 4.b above.	amount for any purpose is not left of the estimate. The total	know of t	n, he				
	 Enter the difference between the aggregate C - Question 1 and total expenses furnished in resp difference is the "adjusted gross proceeds to the iss 	oonse to Part C - Question 4.a. 7	This	rt			\$_	14,969,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)